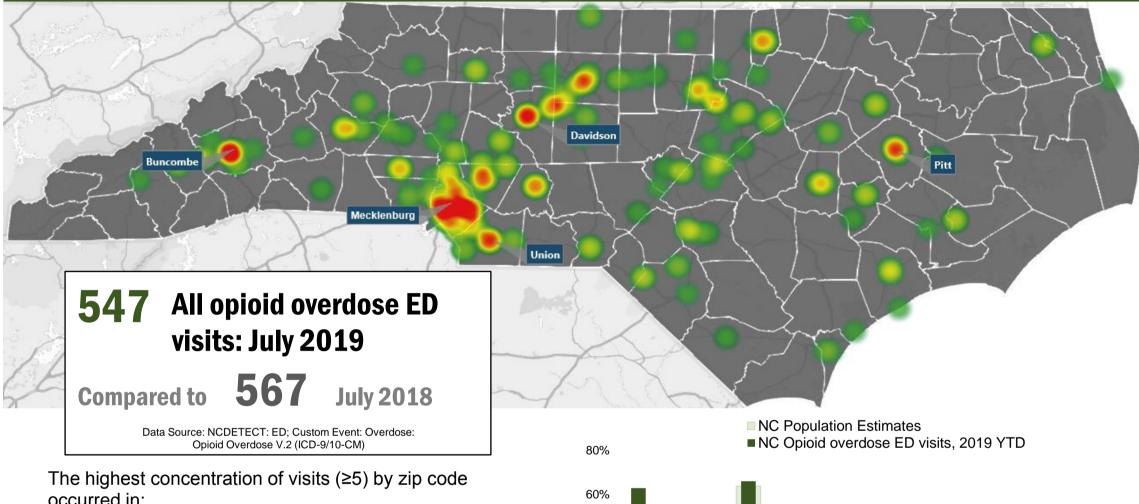
## **ALL OPIOID OVERDOSE ED VISITS: NORTH CAROLINA, JULY 2019**

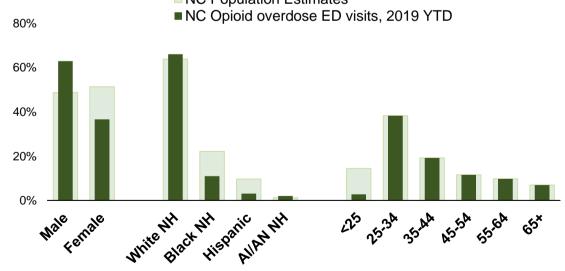


occurred in:

Mecklenburg, Buncombe, Davidson, Pitt, and Stanly counties.

The highest rates of visits (≥10) per 100,000 residents occurred in:

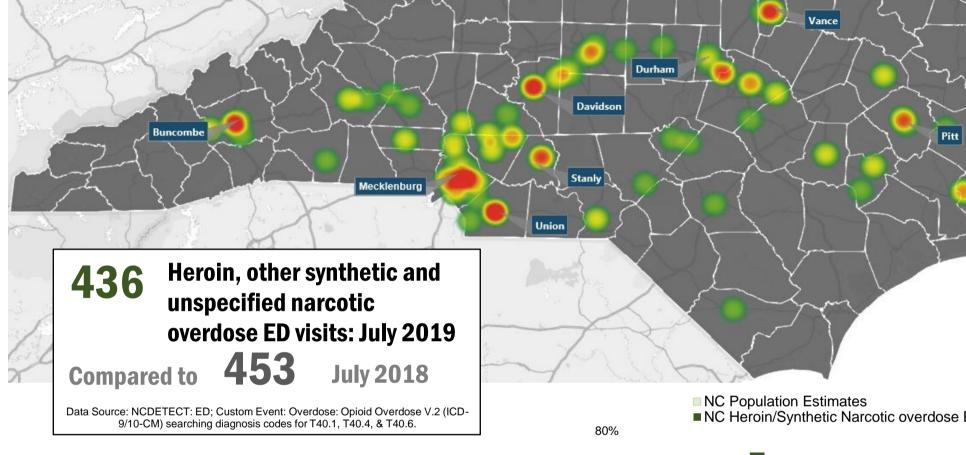
Stanly (19.5), Union (11.2), Robeson (10.6), Buncombe (9.7), and Davidson (9.7) counties.



Note: NH(Non Hispanic). Counts based on diagnosis (ICD-9/10-CM code) of an opioid overdose of any intent (accidental, intentional, assault, and undetermined) for North Carolina residents.\*Emergency department visit data from NC DETECT are provisional and should not be considered final. There may be data quality issues affecting our counts: counties with <10 cases may not be true lack of opioid overdose cases but data quality issues; additionally, some hospitals use non-specific poisoning codes rather than specific opioid poisoning codes.



## HEROIN AND OTHER SYNTHETIC/ UNSPECIFIED NARCOTIC OVERDOSE ED VISITS, JULY 2019

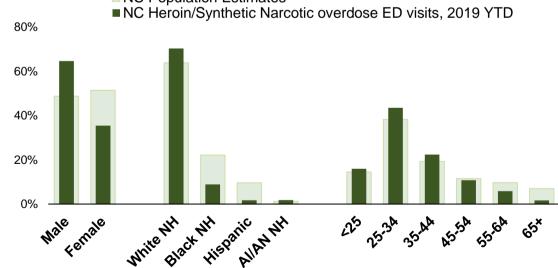


The highest concentration of visits (≥5) by zip code occurred in:

Davidson, Stanly, Durham, Vance, Mecklenburg, and Buncombe counties.

The highest rates of visits (≥10) per 100,000 residents occurred in:

Union (6.9), Pitt (5.6), Buncombe (5.4), Durham (3.2), and Mecklenburg (3.0) counties.



**Note:** NH(Non Hispanic). Counts based on diagnosis (ICD-9/10-CM code) of a heroin or other synthetic narcotic overdose of any intent (accidental, intentional, assault, and undetermined) for North Carolina residents. \*Emergency department visit data from NC DETECT are provisional and should not be considered final. There may be data quality issues affecting our counts: counties with <10 cases may not be true lack of opioid overdose cases but data quality issues; additionally, some hospitals use non-specific poisoning codes rather than specific opioid poisoning codes.

